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KOREAN AMERICAN VIETNAM ALLIES LONG OVERDUE  
FOR RELIEF ACT

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MAY 16, 2023.—Committed to the Committee of the Whole House on the State of  
the Union and ordered to be printed

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Mr. BOST, from the Committee on Veterans' Affairs,  
submitted the following

R E P O R T

[To accompany H.R. 366]

[Including cost estimate of the Congressional Budget Office]

The Committee on Veterans' Affairs, to whom was referred the bill (H.R. 366) to amend title 38, United States Code, to treat certain individuals who served in Vietnam as a member of the armed forces of the Republic of Korea as a veteran of the Armed Forces of the United States for purposes of the provision of health care by the Department of Veterans Affairs, having considered the same, reports favorably thereon without amendment and recommends that the bill do pass.

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## PURPOSE AND SUMMARY

H.R. 366, the “Korean American Vietnam Allies Long Overdue for Relief Act” or “Korean American VALOR Act,” was introduced by Representative Mark Takano of California, the Ranking Member of the Committee on Veterans’ Affairs, on January 13, 2023.

H.R. 366 would allow VA to enter into an agreement with the Republic of Korea to authorize certain VA health care benefits to Korean American citizens who served as a member of the armed forces of the Republic of Korea Armed Forces as an ally during the Vietnam War, beginning on January 9, 1962, and ending on May 7, 1975, and who have become naturalized U.S. citizens during or after their service.

## BACKGROUND AND NEED FOR LEGISLATION

Since 1958, through its Allied Beneficiary Program, the Department of Veteran Affairs (VA) has been furnishing healthcare services to veterans who served in the armed forces of nations that were allies of the United States during World War I and World War II.<sup>1</sup>

The U.S. has established reciprocal agreements with the United Kingdom, Australia, New Zealand, Canada, and South Africa. Veterans from these nations do not need to be U.S. citizens to be eligible for care, and VA has the authority to treat veterans of any combat era. U.S. veterans living in these nations are consequently eligible for co-pay-free care under the nation’s respective healthcare system, and the U.S. government reimburses the host nation. In 1976, during the Cold War, VA’s Allied Beneficiary Program was extended to certain veterans who had served in the armed forces of Czechoslovakia or Poland during World War I or World War II, who subsequently became U.S. citizens. At the time, Congress did not require a reciprocal agreement for these countries as an explicit gesture to communist governments of Eastern Europe; America would cover the costs of care of veterans who fought for democracy. To this day VA is not reimbursed for the care provided to Czech and Polish veterans. Thousands of allied veterans who reside in the U.S. have received culturally competent care at VA. In fiscal year 2022, for example, VA provided care to 1,360 allied beneficiaries, the vast majority of whom are under age 65, from the abovementioned countries.<sup>2</sup>

Over 300,000 Koreans fought alongside the United States in Vietnam. The VALOR Act would create a pathway for Korean American veterans of the Vietnam War to access healthcare through VA. This legislation would provide some measure of long overdue parity for approximately 2,800 veterans of the armed forces of the Republic of Korea, who have since become naturalized U.S. citizens. Unlike counterparts from other allied nations, these veterans have never had access to VA healthcare. As a beneficiary of these veterans’ sacrifices during the Vietnam War, the Committee believes that the U.S. must ensure they finally receive the same respect and consideration their counterparts from other allied nations have received for decades. The needs of Korean American

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<sup>1</sup>The Allied Beneficiary Program was established under P.L. 85–857.

<sup>2</sup>Department of Veterans Affairs, *FY 2023 Budget Submission: Volume II*, p. VHA–50 (Washington, D.C.: March 28, 2022).

veterans of the Vietnam War are no different from those of U.S.-born veterans. From Agent Orange exposure to coping with complex injuries to managing post-traumatic stress disorder—these veterans deserve the specialized care and services only VA can provide. Finally, the parity created by this legislation would show our gratitude and reaffirm this nation's commitment to our strategic alliance with South Korea as we celebrate its 70th anniversary this year.

#### HEARINGS

On March 29, 2023, the Health Subcommittee held a legislative hearing on H.R. 366, and other bills pending before the subcommittee. The following witnesses testified:

The Honorable Mark Takano, U.S. House of Representatives, 39th Congressional District, California; The Honorable Frank Mrvan, U.S. House of Representatives, 1st Congressional District, Indiana; The Honorable Brian Mast, U.S. House of Representatives, 21st Congressional District, Florida; The Honorable Jim Baird, U.S. House of Representatives, 4th Congressional District, Indiana; The Honorable John Moolenaar, U.S. House of Representatives, 2nd Congressional District, Michigan; The Honorable Steve Womack, U.S. House of Representatives, 3rd Congressional District, Arkansas; The Honorable Debbie Lesko, U.S. House of Representatives, 8th Congressional District, Arizona; Mr. Alfred Montoya, Deputy Assistant Under Secretary for Health for Operations, Veterans Health Administration, U.S. Department of Veterans Affairs; Dr. Scotte Hartronft, Executive Director, Office of Geriatrics and Extended Care, Veterans Health Administration, U.S. Department of Veterans Affairs; Mr. David Perry, Chief Officer Workforce Management, Veterans Health Administration, U.S. Department of Veterans Affairs; Mr. Jon Retzer, Assistant National Legislative Director, Disabled American Veterans; Ms. Tiffany Ellett, Deputy Director of Health Policy, The American Legion; Mr. Morgan Brown, National Legislative Director, Paralyzed Veterans of America.

The following individuals and organizations submitted statements for the record:

Veterans of Foreign Wars of the United States; Student Veterans of America; Elizabeth Dole Foundation.

#### SUBCOMMITTEE CONSIDERATION

On April 18, 2023, the Health Subcommittee met in open markup session, a quorum being present, and ordered H.R. 366 be reported favorably to the House Committee on Veterans Affairs by voice vote.

A motion by Ranking Member Brownley of California to report H.R. 366 favorably to the House Committee on Veterans Affairs was agreed to by voice vote.

#### COMMITTEE CONSIDERATION

On April 28, 2023, the full Committee met in open markup session, a quorum being present, and ordered H.R. 366 be reported favorably to the House of Representatives by voice vote.

A motion by Ranking Member Takano of California to report H.R. 366 favorably to the House of Representatives was agreed to by voice vote.

#### COMMITTEE VOTES

In compliance with clause 3(b) of rule XIII of the Rules of the House of Representatives, no recorded votes were taken on amendments or in connection with ordering H.R. 366 reported to the House.

#### COMMITTEE OVERSIGHT FINDINGS

In compliance with clause 3(c)(1) of rule XIII and clause (2)(b)(1) of rule X of the Rules of the House of Representatives, the Committee's oversight findings and recommendations are reflected in the descriptive portions of this report.

#### STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

In accordance with clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the Committee's performance goals and objectives of H.R. 366 are to provide improvements to healthcare benefits provided to veterans.

#### EARMARKS AND TAX AND TARIFF BENEFITS

H.R. 366 does not contain any Congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9 of rule XXI of the Rules of the House of Representatives.

#### COMMITTEE COST ESTIMATE

The Committee adopts as its own the cost estimate on H.R. 366 prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

#### BUDGET AUTHORITY AND CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, the following is the cost estimate for H.R. 366 provided by the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974:

<b>H.R. 366, Korean American Vietnam Allies Long Overdue for Relief Act</b>			
As ordered reported by the House Committee on Veterans' Affairs on April 28, 2023			
By Fiscal Year, Millions of Dollars	2023	2023-2028	2023-2033
Direct Spending (Outlays)	0	0	0
Revenues	0	0	0
Increase or Decrease (-) in the Deficit	0	0	0
Spending Subject to Appropriation (Outlays)	*	*	not estimated
Increases <i>net direct spending</i> in any of the four consecutive 10-year periods beginning in 2034?	No	Statutory pay-as-you-go procedures apply?	No
Increases <i>on-budget deficits</i> in any of the four consecutive 10-year periods beginning in 2034?	No	Mandate Effects Contains intergovernmental mandate?	No
		Contains private-sector mandate?	No

\* = between zero and \$500,000.

H.R. 366 would require the Department of Veterans Affairs (VA) to provide health care and related services to members of the armed forces of the Republic of Korea who served in Vietnam during the period from January 9, 1962, to May 7, 1975. VA would provide that treatment under the condition that Korea reimburse VA for those services. Amounts paid to VA as reimbursement would be credited to the appropriation from which costs for providing that health care were spent.

CBO expects that establishing an agreement and mechanism for VA to accept reimbursements from Korea would increase administrative costs by less than \$500,000 over the 2023–2028 period. Such spending would be subject to the availability of appropriated funds.

The CBO staff contact for this estimate is Etaf Khan. The estimate was reviewed by Chad Chirico, Deputy Director of Budget Analysis.

PHILLIP L. SWAGEL,  
*Director, Congressional Budget Office.*

#### FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates regarding H.R. 366 prepared by the Director of the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

#### ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act would be created by H.R. 366.

#### APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that H.R. 366 does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

## STATEMENT ON DUPLICATION OF FEDERAL PROGRAMS

Pursuant to clause 3(c)(5) of rule XIII of the Rules of the House of Representatives, the Committee finds that no provision of H.R. 366 establishes or reauthorizes a program of the Federal Government known to be duplicative of another Federal program, a program that was included in any report from the Government Accountability Office to Congress pursuant to section 21 of Public Law 111-139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

### SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

#### *Section 1: Short title*

Section 1 would establish the short title as the “*Korean American Vietnam Allies Long Overdue for Relief Act*” or the “*Korean American VALOR Act*.”

#### *Section 2: Provision of certain benefits to individuals who served in the armed force of the Republic of Korea*

Section 2 would amend Section 109 of title 38 U.S.C., by adding at the end the following new subsection:

“Section (d)(1) would make any person described in paragraph (2) eligible for the benefits specified in subsection (a) to the same extent and under the same conditions as a discharged member of the armed forces of a government specified in such subsection who is eligible for such benefits.

Section (2) would describe such a person as one who the Secretary determines served in Vietnam as a member of the armed forces of the Republic of Korea at any time during the period beginning on January 9, 1962, and ending on May 7, 1975, or other period determined appropriate by the Secretary.”

### CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italics, existing law in which no change is proposed is shown in roman):

### CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (new matter is printed in italics and existing law in which no change is proposed is shown in roman):

## **TITLE 38, UNITED STATES CODE**

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## **PART I—GENERAL PROVISIONS**

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## CHAPTER 1—GENERAL

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### § 109. Benefits for discharged members of allied forces

(a)(1) In consideration of reciprocal services extended to the United States, the Secretary, upon request of the proper officials of the government of any nation allied or associated with the United States in World War I (except any nation which was an enemy of the United States during World War II), or in World War II, may furnish to discharged members of the armed forces of such government, under agreements requiring reimbursement in cash of expenses so incurred, at such rates and under such regulations as the Secretary may prescribe, medical, surgical, and dental treatment, hospital care, transportation and traveling expenses, prosthetic appliances, education, training, or similar benefits authorized by the laws of such nation for its veterans, and services required in extending such benefits. Hospitalization in a Department facility shall not be afforded under this section, except in emergencies, unless there are available beds surplus to the needs of veterans of this country. The Secretary may also pay the court costs and other expenses incident to the proceedings taken for the commitment of such discharged members who are mentally incompetent to institutions for the care or treatment of the insane.

(2) The Secretary, in carrying out the provisions of this subsection, may contract for necessary services in private, State, and other Government hospitals.

(3) All amounts received by the Department as reimbursement for such services shall be credited to the current appropriation of the Department from which expenditures were made under this subsection.

(b) Persons who served in the active service in the armed forces of any government allied with the United States in World War II and who at time of entrance into such active service were citizens of the United States shall, by virtue of such service, and if otherwise qualified, be entitled to the benefits of chapters 31 and 37 of this title in the same manner and to the same extent as veterans of World War II are entitled. No such benefit shall be extended to any person who is not a resident of the United States at the time of filing claim, or to any person who has applied for and received the same or any similar benefit from the government in whose armed forces such person served.

(c)(1) Any person who served during World War I or World War II as a member of any armed force of the Government of Czechoslovakia or Poland and participated while so serving in armed conflict with an enemy of the United States and has been a citizen of the United States for at least ten years shall, by virtue of such service, and upon satisfactory evidence thereof, be entitled to hospital and domiciliary care and medical services within the United States under chapter 17 of this title to the same extent as if such service had been performed in the Armed Forces of the United States unless such person is entitled to, or would, upon application thereof, be entitled to, payment for equivalent care and services under a program established by the foreign government concerned for persons who served in its armed forces in World War I or World War II.

(2) In order to assist the Secretary in making a determination of proper service eligibility under this subsection, each applicant for the benefits thereof shall furnish an authenticated certification from the French Ministry of Defense or the British War Office as to records in either such Office which clearly indicate military service of the applicant in the Czechoslovakian or Polish armed forces and subsequent service in or with the armed forces of France or Great Britain during the period of World War I or World War II.

*(d)(1) Any person described in paragraph (2) is eligible for the benefits specified in subsection (a) to the same extent and under the same conditions (including with respect to applicable reciprocity requirements) as a discharged member of the armed forces of a government specified in such subsection who is eligible for such benefits under such subsection.*

*(2) A person described in this paragraph is a person whom the Secretary determines served in Vietnam as a member of the armed forces of the Republic of Korea at any time during the period beginning on January 9, 1962, and ending on May 7, 1975, or such other period as determined appropriate by the Secretary for purposes of this subsection.*

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